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CONFIRMATION NO. 1606

SERIAL NUMBER 10/735,084	FILING DATE 12/12/2003 RULE	CLASS 604	GROUP ART UNIT 3761	ATTORNEY DOCKET NO. 5297/198
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****
 SWITZERLAND 2002 0949/02 06/05/2002

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 03/23/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance <i>[Signature]</i> Examiner's Signature Initials	STATE OR COUNTRY SWITZERLAND	SHEETS DRAWING 1	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 3
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TITLE
 Thorax drainage system

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